SENDER: COMPLETE THIS SECTION		COMPLETE IN	is section	V ON DELI	VENT	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpied or on the front if space permits.</li> </ul>	e     -	A. Signature  X ULA  B. Received by  Verya W	ritmar	sh	☐ Agent☐ Addre	essee
Article Addressed to:		of YES, enter	delivery ad		_	
J&S Contractors, Inc. Johnnie D. Glick, President	14	3 Septice Type Certified I Registere	Mail DE	Express Ma Return Rece C.O.D.	640785 ill elpt for Merchal	ndise
		4. Restricted D	elivery? (Ext	ra Fee)	☐ Yes	
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PS Form 3811, August 2001 Dom	estic Returi	n Receipt			102595-02-N	л-1540

COMPLETE THE SECTION ON BELINERY

Sender: Please print your name, address, and ZIP+4 in this box

Kevin Shade (6SF-TE), U.S. EPA 1445 Ross Ave, Suite 1200 Dallas, TX 75202

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